



THE COURIER



January/February 2002

NMCP names new Ombudsman

By JO2 Duke Richardson



Photo by Lt. Robert Lyon

Command Master Chief Carroll talks with new Command Ombudsman Mrs. Shannon Whelan

Naval Medical Center Portsmouth recently added another name to the list of people family members can go to when they need help. Shannon Whelan reported to the hospital late last month eager to take the helm as NMCP's new ombudsman.

Originally from Charleston, WY., Whelan is no stranger to the world of helping people as an ombudsman. Before coming here, she served as an ombudsman for the USS Theodore Roosevelt.

As an ombudsman, she serves as our "go-between" for the command and military families. "I am the middle man," said Whelan. "I get information from the command to the command families and vice versa. I also provide info on family programs, community resources, pertinent local and base phone numbers and ships' movements and arrivals when released by the command."

An ombudsman serves as an official volunteer in the command and is part of the Command Family Support Team. "My main mission is to provide family

members with information and support to and to answer their questions (on things such as monetary assistance, child care issues, and deployed spouses)," she said.

One project for the future is something a good number of ships already have for families. A nationwide care line. "We do hope to set up a care line number for people across the U.S. who have family members attached to the fleet hospital and any other platforms so they can call a toll-free to find out information that can be released from the command," she said. "That information will be updated as the need arises or as more information comes about."

If you need to reach NMCP's ombudsman, she can be reached at 757-546-5328 and 757-652-0820. "I do have 'working hours' from 8 a.m. to 9 p.m., but I am available 24 hours a day, seven days a week," she said. "Information can get to those in the chain of command that require the need-to-know about their sailors and immediate family's care in the quickest fashion available."



Photo by JO2 Jodi Durie

Active duty couple gave birth to Naval Medical Center Portsmouth's first baby of 2002. Proud parents LI2 Andrea S. Johnson from Joint Forces Intelligence Command and YN3 Curtis K. L. Johnson from the USS Dwight D. Eisenhower welcomed their son Curtis K.L. Johnson II into the world at 1:51.

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*How do I get something
in*

THE COURIER?

The command's monthly publication provides an avenue to circulate all the useful information the Medical Center staff has to offer. Contact the Public Affairs Office at 953-7986, Fax 953-5118, via Guardmail, or you can E-mail the PAO, Lt. Lyon, at rtlyon@pnh10.med.navy.mil

Submissions should be on a disk in text or Word format with a paper copy attached. Photos are welcome and can be returned on request. The Courier now comes out once a month. Send your submissions to the Public Affairs Office and we'll put it in the next current issue, space permitting. Submission deadline for the next issue is the 15th!!

We are located in Bldg. 215, second deck, Room 2-118 (next to the Conference Room.)

Third class shows leadership as LPO

By JO3 Theresa Raymond

HM3 Subrina Strauss from Branch Medical Clinic Sewells Point has been given the opportunity to prove her leadership skills, and it seems she's up for the challenge.

Strauss is the Family Practice Clinic's acting Leading Petty Officer at Sewells Point. "Being the acting LPO is a challenge, but I'm glad I'm doing it. The Navy has given me such an opportunity, and I'm glad to take it."

The biggest Challenge for Strauss is staffing in her clinic. As the acting LPO, Strauss deals with the shortage of staff, trains junior corpsman, puts in provider schedules and deals with patient complaints.

"Dealing with the staffing shortage is still a challenge. Things have gotten easier, though, ever since (our clinic) started working closer with the Naval Medical Center Family Practice Clinic in Portsmouth. They send staff to train at our clinic in rotation," explained Strauss.

Although Strauss isn't sure if she'll reenlist, she feels thankful for all the opportunities the Navy has given her. "I know a lot of people don't like it, but I do. The benefits are great, the pay takes care of my family, and I enjoy the job I do. I've only been in three years and am a 3rd (Class Petty Officer) already. I don't know if I'll stay in, but I know I'll consider it."

Along with being the acting LPO for the clinic, Strauss is also the assistant Section Leader for her duty section.

She was also selected for Junior Sailor of the Quarter for Sewells Branch Medical Clinic for the 3rd quarter of the year. Sewells Point is Strauss' second duty station. She was previously stationed at the National Naval Medical Center Bethesda.



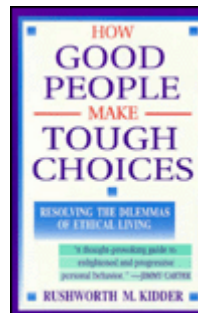
Photo by JO3 Theresa Raymond

Working hard to help her junior shipmates, HM3 Strauss even helps patients while on EMS duty.

February Book Club Selection

How Good People Make Tough Choices: Resolving the Dilemmas of Ethical Living

by Rushworth M. Kidder



Facilitator:
CAPT Jerry
Shields, CHC,
USN

Breakfast Club:
Feb 14 and 28,
2002

This book offers the practical tools for careful deliberation of the ethical predicaments of daily living. It is a book for those who want to address and resolve tough choices through energetic self-reflection.

Book is available in the library.

Cemetery dedicated to former Command Historian, Captain Conaway

The exact age of the NMC Portsmouth cemetery is unknown. The first of the 774 graves bears a tombstone dated Aug. 1, 1838. Now, over 163 years later, it will be known by a formal title.

The national burial site was named the "Captain Conaway Memorial Cemetery" in dedication ceremonies held at NMC Portsmouth, Jan. 21, 2002. Rear Adm. C. E. Adams, the hospital's commander, and Mrs. Margaret P. Conaway officially unveiled the monument within one day of the anniversary of Capt. Conaway's death on Jan. 22, 2001. The event was attended by Conaway's children and included: Capt. M. H. Conaway, CEC, and his wife, Carol; retired Lt. Cmdr. T. G. Conaway and his wife, Susan; Mr. Theodore G. Conaway; Mrs. Mary C. Turlington; and Mrs. Barbara C. Thomson.

The event was also attended by Mr. Charles Schmidmeister, President, Fleet Reserve Association Branch 40, Chesapeake, who donated the plaque which is mounted on top of the memorial. Other in attendance included members from local fleet reserve chapters, Reserve Officers' Association, NMC Portsmouth, and friends of the family.

Conaway enlisted in the Navy on Nov. 17, 1935, and during his 40 years' service completed recruit training in Norfolk, hospital corps school in Portsmouth, and served aboard two aircraft carriers, a cruiser, a destroyer,



Photo by Lt. Robert Lyon

Captain Conaway Memorial monument as it sits in the center of the cemetery.



Photo by Lt. Robert Lyon

The supporting stones were taken from Building One and cut to support the plaque which contains the names and locations of all deceased interred at the cemetery.



Photo by Lt. Robert Lyon

The monument contains all of the names of persons interred at the cemetery

and two transports. He held every rate/rank from seaman to captain including warrant and chief warrant officer. During World War II he was temporarily a hospital corps officer prior to the creation of the Medical Service Corps in 1947. Upon retirement in 1975, he volunteered to serve as command historian and

held that post until December 2001.

This resting ground is full of tradition and tragic memories of the past. Now it bears the name of Captain Theodore H. Conaway, a person who honorably served his country and navy while on active duty and for over 25 years as a volunteer historian for Naval Medical Center, Portsmouth.

JTF in Cuba to oversee Al Qaeda

By Jim Garamone, American Forces Press Service

WASHINGTON (NNS) — More than 1,000 U.S. service members are en route to the U.S. Naval Base at Guantanamo Bay, Cuba, to provide security for the al Qaeda detainees under U.S. control.

The base will serve as a temporary holding facility for al Qaeda, Taliban and other detainees that come under U.S. control during the war on terrorism, DoD officials said. The U.S. Southern Command is in charge of the operation.

Southern Command has activated Joint Task Force-160 to head the detainee operations. The task force is under the command of Marine Brig. Gen. Michael Lehnert from Camp Lejeune, N.C.

The task force includes active-duty service members from Fort Hood, Texas; Fort Campbell, Ky.; Roosevelt Roads, P.R.; Camp Lejeune; Norfolk, Va.; Dover Air Force Base, Del.; and Charleston Air Force

Base, S.C. Reserve component personnel will also deploy on this mission. Most personnel will be military police.

The service members will staff the maximum-security installation needed to house the detainees, provide for the detainees' security and perform support functions, Southern Command officials said.

Up to 2,000 detainees could be housed at the facility, officials said. The first group of 20 al Qaeda detainees were scheduled to arrive at the Cuban base Jan. 11. DoD officials stressed that the holding conditions at Guantanamo will be humane and in accordance with the Geneva Convention.

Additional information on Operation Enduring Freedom and the war on terrorism is available at <http://www.defendamerica.gov>.

Naval Academy seeks qualified Reserve Officers

ANNAPOLIS, Md. (NNS) — The U.S. Naval Academy has a need for qualified Naval Reserve officers, with at least a master's degree in an appropriate academic discipline, as instructors in designated academic departments, starting no later than August 2002.

Recall opportunities exist at the U.S. Naval Academy in one of the following disciplines: electrical, mechanical, marine, ocean or control systems engineering; naval architecture; chemistry; computer science; mathematics; oceanography; physics; political science; English; foreign language (Spanish); history and economics. Interested Reservists should send a letter of application, plus a completed officer qualification questionnaire — or an equivalent resume of their academic, professional and naval experience — and full-length photo in a khaki uniform, to: Dr. Michael C. Halbig, associate dean, Office of the Academic Dean and Provost (Code 10), 121 Blake Road, U.S. Naval Academy, Annapolis, MD 21402-5000. Additional details are available by calling DSN 281-1581, commercial (410) 293-1581 or fax (410) 293-3735. Interested officers can also send an e-mail to mailto:halbig@nadn.navy.mil.



Making New Years resolutions stick

By JO3 Theresa Raymond

There is a sense of renewal and rebirth with the making of a resolution at the beginning of the New Year. About 12 percent of resolutions fail within the first month, but with the help of some Naval Medical Center Portsmouth programs, your resolutions don't have to become part of that statistic.

"Most people don't know how to make a reasonable resolution, which is why they fail to keep the ones they've made," says Community Health Program Specialist Elaine Nestell, RN.

"People tend to set high goals for themselves, and then wonder why they never attain them," said Nestell. "So they either stop setting goals (never a good choice), or make resolutions that are ridiculously easy to keep. Wellness and Preventions provides a number of services designed to help everyone reach their goals."

Nestell, who works in the Wellness and Preventions office on base, explains that prevention is a great goal for the year 2002. "Taking preventive measures can stop diseases (from developing) and will help you feel better," Nestell explains. "You can't wait until you have a problem. Prevention is the key to a healthier and longer life."

NMCP's Wellness and Preventions and the Morale, Welfare and Recreation office, or

MWR, offer programs designed to help keep this year's self-promises. Whether it's the vow to lose weight, quit smoking or learn how to eat healthy, NMCP has a program that's just right for you.

"There are programs designed solely for active duty, then there are some for everyone who works at the hospital," Nestell points out. "We even have a walking club. For such a small base, it offers a lot."

These two offices have many programs for active duty, retiree's, dependents, DoD civilians and civilian staff. To see if you qualify for any of these program, or for more information call Wellness and Preventions at 953-5097 or MWR at 953-5095.

Here are some of the programs offered by both MWR and Wellness Preventions.

- Learn about cholesterol, what it is and what the numbers mean in health promotions Cardiovascular Risk Reduction Class. Call 953-2627 for information about registration.

- Blood pressure a little high? Don't know? Then you should get a blood pressure screening at NMCP. It's given daily during normal business hours and is open to active duty, beneficiaries and civilian staff on a walk in basis. Call 953-5097 for more information.

- Watching weight is something everyone promises to do during the New Year and

NMCP didn't skip that one either. Health Promotions offers a five-week class covering nutritional principles, exercise and behavior modification techniques. Call 953-2627 to see if you qualify for the class.

- Hypnosis is very popular and it's offered at NMCP. The Weight Management and Self-hypnosis class offers a four-session program using relaxation techniques and guided imagery. Call 314-6014 to register.

- Want to kick that smoking habit? NMCP's health promotions can help. They offer a number of tobacco cessation classes designed to give you a "fresh start." The four session program is spanned over two weeks has two different times to better suite your needs. Call Mr. West at 953-5975 or Mr. Burke at 953-2075 for more information

- If your vow is simply to get out more, MWR can help. They offer fishing and skiing boats, bass boats, pop-up campers, and many other items. Call Ken Mulvaney at 953-5855 for more information.

- Want to start working out but don't know how. Learn how to effectively work out with Dee Hunt, the command group fitness coordinator. Hunt is available for one-on-one consultations, nutrition and exercise advice, and personal training. Call 953-5094 or 953-5095 for an appointment.

New rules for ordering laboratory tests through CHCS

Effective Jan. 1, 2002, NMCP inpatient wards and outpatient clinics must order all laboratory tests in CHCS, including Anatomic Pathology. An SF518 is still required for transfusion testing in addition to the computer orders. Patients arriving to the Laboratory without CHCS orders will be asked to wait until laboratory staff can contact the provider for orders.

Specimens submitted to the laboratory must be labeled with the following

minimum information: patient's first and last name; FMP/SSN; date and time of collection; clinic location; provider's first and last name; and if applicable, specimen source (e.g., left knee, throat, etc). Specimens submitted without CHCS orders will not be processed until laboratory staff can notify the provider for orders. Specimens received by the laboratory without sufficient information to determine requesting provider or location will be held for seven

days before disposal.

NMCP providers are encouraged to contact the Laboratory Information Systems Office at 953-1681/1683 for assistance with creating order sets or for general laboratory test ordering guidance. If refresher training is needed, please contact Staff Education and Training, 953-5458, to reserve a seat in the next available training class.

Retiree wins Boone Volunteer of the Quarter

By JO2 Duke Richardson

After 14 years, a retiree is finally getting some well-deserved recognition. Joseph Toben, a Red Cross volunteer was recently named the Boone Branch Medical Center Volunteer of the Quarter.

Although he is happy and pleased to win the honor, he really doesn't feel any different now than he did before winning the award. He just continues to do his job giving people their prescriptions at the clinic's medication refill office. "I'm just doing the same thing everyday," said Toben. "It's nice to receive the award, but basically I'm just doing the same job I've done for years."

For over a decade Toben has been a familiar face to the thousands of people that come through the Boone medication refill office. He says he has really enjoyed helping people for all of the years he has been volunteering. "Even though as with any job you have your good days and bad days, overall I've enjoyed my time here as a volunteer," said Toben. "That's why I've been coming out here three times a week for the past few years. Since I've been here so long I've gotten to know a lot of our customers and they are nice people I enjoy helping. Sometimes some of the people will come in and say 'I missed you the last time I was here' and I'd then tell them I only work here three days a week. Then they'll be like 'Oh yeah, that's right.'"

Even though the job may get a little hectic at times, Toben said the accolades he hears from the patients has made the work he has done for over a decade worthwhile. He has had people who live near other branch medical clinics come out to Boone just because of the quality care they feel they get there. "People have told me things such as 'I live out by (another clinic) but I would rather come here because I like the care and service I get here.' Things like that we like to here and it makes the work we do here worth it in the end."

Before spending his days as a volunteer at a Naval healthcare clinic, he was on the other side of the uniform fence as a signalman. He served his country for 30 years before retiring as a master chief.

Serving for more time than many of the Navy's junior personnel have been walking and talking, he earned distinctions he loves to look back on with pride. These include receiving a grand total of nine Good Conduct Medals, and receiving the recognition of Master Instructor. "That is something not many people get," he said. "When I was in, going to Instructor Training School wasn't something anybody could just pick, you had to be selected to go there. (As for the Good Conduct Awards), I received my ninth one on the day I retired. The captain I went before said 'this is something I have never seen before, a Good Conduct Award for the ninth time. Were you really that good?' I said 'No sir, I just didn't get caught.'"

Having the chance to learn things, see the world, and serve the country are some of the things Toben says was the most rewarding aspects of being in the Navy for so many years. "It was a real experience, especially taking the younger (Sailors) and training them so they can do the jobs they would have to do and pointing them in the right direction and (correcting) them when they needed it."

Being in uniform from 1945-1975, Toben served his country during just about every major

U.S. conflict in the last century. During that time, he had a share of naval memories to last him another lifetime and saw the Navy go through major changes over the years. "When I first came in if you goofed up, you could expect a kick in the pants or a trip down to the boiler room, and a number of people needed it at times," he said. "But of course that changed and is not supposed to happen anymore. Also, years after I joined, the Navy required someone wishing to join to at least be a high school graduate, whereas that wasn't the case when I came in. But just like everything else the Navy changed as time went on."

Although things were not exactly on the sunny side all the time, Boone's Volunteer of the Quarter says that overall, being a Sailor for so many years was an experience he would not hesitate to relive. Given the opportunity, Toben would recommend anyone "Go Navy" and to pick a skill they can use whenever they decide to hang up the uniform for good. "A person would be wise to pick a job field they can use on the outside and to take advantage of all of the opportunities the Navy has to offer and make good use of their time in," he said. "As for me I'll always miss it and would definitely do it again if I could."



Photo by JO2 Duke Richardson

Boone Branch Medical Clinic's Volunteer of the Quarter Joseph Toben gives a prescription order to Sandy Seaton.

Oakleaf Club comes to sailors aide



Photo by Lt. Robert Lyon

Oakleaf club Treasurer Lindy Ridgeway (right) presents IT2 Evelyn Culla (left) with a \$200 gift card to help replace home and personal items that were destroyed in a recent fire.

First and Finest Team Award presented to Tidewater Laboratory Services

By JO2 Jodi M. Durie

This quarters "Commander's First and Finest Team Award," which recognizes teamwork throughout the hospital, was presented to the Tidewater Laboratory Services Team.

The team, which consisted of personnel from Navy, Army, Air Force, and Veteran's Administration laboratories made significant changes resulting in the standardization of each of their laboratories.

"In the beginning we established a much smaller team to bring all of the hospital's entities together to include the Branch Medical Clinics," said Lt. Brian Ivey, team leader NMCP's general laboratory. "We soon realized potential for the entire Tidewater area. We evaluated our economy of skills, how we could do more with less and share our resources," added Ivey.

While improving the efficiency and staff morale in the laboratories at NMCP and its Branch Medical Clinics, Fort Eustis, Langley and Veteran's Administration installations, the team's efforts will save NMCP's Laboratory alone over \$650,000 annually.

The team also standardized the accreditation process to the College of American Pathologists consolidating 10 laboratory directors into one eliminating the need for each facility to assign a director.

Not only has the Tidewater Laboratory Ser-

vices Team made an impact on each of their facilities as a whole, they have also provided beneficiaries with additional services.

"The standardization makes it easier for the patient during each episode of care," said Ivey. "Whichever hospital they are closest to can provide them with the same Lab services. We share the same CHCS server allowing us to access their tests at Langley, Fort Eustis," explained Ivey.

The Tidewater Laboratory Services Team was one of four teams nominated for the team award. Others include, the Neurology team, the decision support team, and the Defense Medical Logistics Standard Support System Implementation Team.

Although NMCP's Commander was pleased with the accomplishments of each of the teams, he was particularly impressed with the diversity of the Tidewater Laboratory Services Team.

"We really want to take this time to savor this recognition of our own today. Here (at NMCP) we have such an opportunity to make a difference in Navy medicine for our beneficiaries," said Rear Adm. Clinton Adams, NMCP's commander. "It is so impressive to see that you have brought together other departments, organizations and services into one team," said Adams.

Navy Medicine steps up to help prevent Ecstasy abuse

By Brian Badura, Bureau of Medicine and Surgery

WASHINGTON (NNS) — Ecstasy abuse is on the rise across the country, and the military is not immune to the problem.

Although the Navy maintains a zero-tolerance position on drug abuse, use of the club drug among Sailors has increased over the past few years.

Now, with the help of Navy medicine, hiding ecstasy use is going to be much tougher. Navy drug screening labs are increasing their ability to detect ecstasy threefold, thanks to a new reagent used during testing. The reagent will be used in all Department of Defense screenings, which started in early January.

"Our catalyst for the change was the trend of increased use," said Cmdr. Lisa McWhorter, Medical Service Corps, drug testing program manager at the Navy Environmental Health Center in Norfolk.

Bill Flannery, branch head for the drug detection and deterrence office at the Navy Personnel Command, said the reagent would expand the window of opportunity to detect ecstasy. "We will continue to evolve the Navy's drug testing program with technology. This new reagent is the gold standard by which all others are compared."

In the past, detection of ecstasy came as part of a more general test for amphetamines. According to McWhorter, the new agent has a greater ability to detect smaller amounts and can specifically detect drugs like ecstasy.

Navy leaders have been working on revising the testing process for about two years. In addition to helping make the final selection on the reagent from the vendor, Navy Medicine also tested the product at the Navy Drug Screening Lab in Jacksonville, Fla., before rolling it out to the troops.

The effects of ecstasy abuse can be seen in the short and long term. Symptoms range from decreased ability to regulate sleep and emotions, to increased chances for heart attack, stroke and possibly death.

To learn more about ecstasy, go to the PERS-6 Web site at <http://navdweb.spawar.navy.mil>.

Personal trainer keeps students on track

By JO3 Theresa Raymond

Keeping this year's resolution to lose weight or get fit sounds reasonable, but many don't realize all the aspects that go into it. That's where Dee Hunt, Group fitness Coordinator and personal trainer, comes in. She's a concerned trainer at Naval Medical Center Portsmouth who wants everyone on base to keep this year's promises.

Hunt started working in the field of aerobics 11 years ago after losing 120-pounds herself. "I had lost weight myself, and I feel that's why people aren't so intimidated by me. I'm not the 'norm' for what a personal trainer should look like, so (my clients) feel they can relax and learn instead of being scared and intimidated," Hunt said.

Although this is a far stretch from her initial career as a full figured model in Norfolk and a nail and hair technician, she feels this is the better choice for her life.

"This job has taught me so much, and it's so much fun. I get to work with people of all ages and really help them be healthier people," explained Hunt.

The program, which is offered to all active duty, retirees, dependants, and some DoD employees, isn't easy. According to Hunt, most people have to prioritize their entire lifestyle in order to make exercise a part of their lives. "Everyone has to make sacrifices, but as long as they're willing (to train), I'm willing to help," said Hunt.

Hunt feels developing strategies to keep each client interested and motivated is often as important as designing the actual exercise program.

"Most of my clients want to lose weight, but I also deal with some people who are recovering from injuries. How I approach each client depends on their needs, the time they have to work out, and their commitment. Those who aren't committed usually quit, but I try to help set realistic goals so they can better benefit from it," explained Hunt.

Clients in Hunt's program are first asked what their goals are. "Goals are important, because then they realize what they need to get done. If their goals are too high, I discuss them and try to make them more realistic," said Hunt.

Then they are asked to keep a food log. "Most people don't realize how much they eat until they put it on paper, then we can deter-

mine what's good and what's not so good," said Hunt.

Her clients are then given an activity log where they have minimum, but realistic, requirements. "I usually start with something light and easy three times a week. Then I move them up. I have to work with each individual as everyone's schedule is different," said Hunt.

After monitoring their cardiovascular workout, eating habits and weight loss, Hunt reevaluates each client. "Usually around the 30-day mark each client is reevaluated just to see if their goals have changed or if they need any adjustments to their workout," said Hunt.

After this '30-day mark', Hunt supervises her clients on a basic weight training program for two weeks until they get the hang of it, then they work out on their own.

"This is a long process. I don't want anyone to think it isn't. I'm teaching a lifestyle, not quick weight loss," Hunt explained. "(My clients) have to learn to do it on their own."

Hunt also teaches many classes at the gym and pool ranging from kickboxing to aqua aerobics. For more information or to schedule an appointment with Hunt call 953-5094/5095.



Photo by JO3 Theresa Raymond

Dee Hunt, Group fitness Coordinator and personal trainer, leads an aerobics class at NMCP gym.



Photo by JO3 Theresa Raymond

NMCP personal trainer Dee Hunt helps others work off those holiday pounds during an early afternoon kickboxing class at NMCP's Base Gym



Photo By Lt. Robert Lyon

David Craft, TRICARE Marketing specialist, discusses the benefits of TRICARE during the recent Health Expo at the Norfolk Scope. This is an annual event hosted by WTKR which reports that over 30% of expo visitors are TRICARE beneficiaries.

VA Home Loan Ceiling Raised; Guard, Reserve Loan Authority Extended

By Rudi Williams, American Forces Press Service

WASHINGTON (NNS) — An act recently passed by Congress and signed by President Bush increases the guaranty on Veterans Affairs home loans from \$50,750 to \$60,000.

The increase means eligible veterans can use their loan benefit to purchase a home costing as much as \$240,000 without a down payment. Many lenders will make VA no-down-payment loans for four times the maximum guaranty amount, said Judy Caden, deputy director of VA's Loan Guaranty Service.

Before the President signed the Veterans Education and Benefits Expansion Act of 2001 on Dec. 27, 2001, the maximum guaranty was \$50,750, which allowed no-down-payment loans of up to \$203,000.

"We recommended increasing the loan guarantee a couple of years ago because of rising housing costs in places like Washington, California and the New England area," she said.

"The Mortgage Bankers Association and other groups have also been pushing for it."

The act also changed the Native American veterans housing loan program, assistance for specially adapted housing and home loans for National Guardsmen and Reservists.

VA's direct loan program for Native Americans assists those vets buying on trust land, she noted. VA issues the loan, not a private lender, so the program's different from regular guaranteed home loans.

"It's strictly for veterans living on reservations because it's difficult to get lenders to make loans in those areas," Caden said.

The act extends the nine-year-old pro-

gram for four years to Dec. 31, 2005. The program's loan ceiling is \$80,000, except in certain high-cost areas where VA has approved up to \$120,000, she said. Loan interest rates are competitive with the mortgage market, she added.

Caden said it has been difficult for people on trust lands to meet income requirements for loans. So far, VA has only made about 30 loans on trust lands in the continental United States.

"We've had the most success in the Hawaiian and American Samoa homelands," she noted. "We've made more than 200 of these loans in the Pacific areas."

The act also increases specialty-housing grants from \$43,000 to \$48,000 for severely disabled veterans who need homes built to accommodate wheelchairs. The grant pays for such things as wider hallways, lowered kitchen appliances and counter tops, and bigger bathrooms, Caden said.

Veterans can use both a grant and a regular VA guaranteed loan to cover the total cost of their home purchase, she said.

Another grant program for housing adaptations for less seriously disabled vets had its ceiling raised to \$9,250 — up from \$8,250, she pointed out.

"The money is for some blinded veterans and amputees who need extra help," she said.

The new law also extends housing loans for National Guard and Reserve personnel from September 2007 to Sept. 30, 2009. Reserve component personnel are authorized the same home loan guarantees as active-duty personnel.

A Reminder on the SGLI Family Coverage Program

By Chief of Naval Personnel Public Affairs

WASHINGTON (NNS) — Spouses of service members enrolled in Servicemembers' Group Life Insurance (SGLI) are now automatically insured for up to \$100,000 of Family SGLI.

Dependent children — including all unmarried dependent children under the age of 18, and those over 18 but younger than 23 who attend an accredited school, and children who are declared legally incompetent before the age of 18 — will be insured for \$10,000 at no cost. Family members of service members who do not have SGLI insurance will not be covered.

Family member SGLI coverage is automatic. Service members who do not want spousal coverage, or would like reduced coverage, must make the election in writing on Form SGLV 8286A. The premium will be automatically deducted from their pay. Service members, not spouses, are able to make these elections.

For more information see the Family SGLI Web site at <http://www.insurance.va.gov/sglivgli/sglifam.htm>. Also see the PERS-62 Web site for updates at <http://www.bupers.navy.mil/pers62/index.html>.

TRICARE Dental Plan premium rate change

TRICARE Dental Program (TDP) members will notice a slight increase in their monthly premiums beginning this month.

The new rates are effective on Feb. 1, 2002; however, since premiums are collected one month in advance, TDP members will notice the change with their January 2002 billing statement, payroll allotment or deduction. ETDP premiums will increase by about 3.5 percent or a little less than the annual increase in the dental services component of the Consumer Price Index.

The new monthly premium rate for active duty family members and members of the Selected Reserve, Individual Ready Reserve (Special Mobilization Category) and family members of Reservists who are on active duty for more than 30 consecutive days is \$7.90 for a single enrollment and \$19.74 for a family enrollment. Members of the Individual Ready Reserve (Other than Special Mobilization Category) and their family members and the family members of the Selected Reserve will pay a new monthly rate of \$19.75 for a single enrollment and \$49.36 for a family enrollment. Since the government pays 60 percent of the total monthly premium for most categories of TDP enrollees, the actual increase for the majority of TDP members will be small — 27 cents a month for a single enrollment and 66 cents a month for a family enrollment.

NMCP Remembers Dr. Martin Luther King Jr.

By JO2 Duke Richardson

Naval Medical Center Portsmouth recently honored the lifelong struggles of Dr. Martin Luther King Jr.

Themed "Remember, Celebrate, Act: A Day on, Not a Day off," the celebration gave NMCP staff members a chance to pay respect and reflect upon the achievements of Dr. King.

An emotional speech by guest speaker Anne Thornton, the president of the Norfolk Chapter of the Southern Christian Leadership

Conference was the highlight of the event. According to her, the work Dr. King started over 30 years ago continues today as "old dogs" such as poverty, racism and inequality continues today. "We are still facing the same issues we faced years ago, so the struggle is not over," said Thornton. "We have to be serious about keeping Dr. King's dream alive."

She also mentioned the importance of not giving up and remembering the actions of other African-Americans besides Dr. King who

rallied for equal rights for all. "Even though we still have issues such as drugs, mental illness, and AIDS, that could make some people want to sell out and give up, but you need to ask yourself, 'would Dr. King and your forefathers and mother be happy today?' They paved the way for us and the next generation to have rights and a place in America...so we must not sell out. Dr. King did not sell out, so we must fight to achieve racial equality."

Be a heartsaver, not a heartbreaker with hypertension

By Tarah Alkire, Health Promotions

What is blood pressure?

Blood pressure is a necessity for everyday life. Without it, the body cannot function and gain the nutrients needed for everyday activity. The heart pumps the blood to the arteries creating pressure. Your heart should beat 60-80 times per minute.

How to read blood pressure?

When you have your blood pressure read, you will see two numbers. For example: 128/86 (128 over 86); the first (highest) number is your systolic pressure and represents the pressure when your heart is beating; the second (lowest) number is your diastolic pressure and represents the pressure in your heart when your heart is not beating. Blood pressure of less than 140 over 90 is considered normal for adults.

What is hypertension?

Hypertension is another name for high blood pressure. Hypertension is more prevalent in African Americans, middle age and elderly people, obese people, heavy drinkers and women taking birth control pills.

Recommended Blood Pressure Levels by the American Heart Association				
Category	Systolic	Diastolic	Follow-up	
Recommended	>120	And >80	Recheck in 2 years	
Normal	>130	And >85	Recheck in 2 years	
High normal	130-139	Or 85-89	Recheck in 1 year	

Why should I be concerned with my hypertension?

Hypertension causes the heart to pump harder and the arteries to carry blood under pressure. Over a period of time this may cause the heart and arteries not to function properly. Hypertension increases the risk for stroke, congestive heart failure, kidney failure and heart attack.

How do I know if I have hypertension?

Many people don't even know that they have hypertension. Some people live for years without even knowing. There are no signs or symptoms to let you know that your blood pressure is high. According to

High

Mild	140-159 Or 90-99	Confirm within 2 months
Moderate	160-179 Or 100-109	Evaluate within 1 month
Severe	180 or higher Or 110 or higher	Evaluate immediately

recent estimates, one in four Americans has hypertension and nearly one-third of these people do not know they have hypertension. The only way to know if you have high blood pressure is to have your blood pressure checked at your doctor's office.

Assess your risk

The following factors can increase your risk for hypertension:

- Women taking the pill
- Pregnancy
- Obesity
- African Americans
- Family history of hypertension

The Cure

Hopefully in the future we will have a cure for hypertension. Until then, you are your best resource. Work with your doctor, nurse and other healthcare providers to manage your hypertension. You may need medication, weight loss, less salt, more exercise and a limit on your alcohol intake. Your provider can help you determine the best plan for you.

CHOLESTEROL

What is cholesterol?

From time to time you hear a lot of negative hype on cholesterol. The fact is, you need cholesterol, but too much can be bad for some people. Cholesterol helps your body build new cells, produce hormones and digest food; yet, too much cholesterol can harden the arteries, making you more susceptible to heart disease, stroke, and other diseases caused by clogged blood vessels.

Is cholesterol good or bad?

There are two types of cholesterol, LDL (low density lipoprotein) and HDL (high density lipoprotein). LDL is known as the 'bad cholesterol' because it collects in the walls and arteries leading to heart problems. HDL 'good cholesterol' can actually help the body by carrying extra cholesterol back to the liver allowing the body to remove unnecessary cholesterol. Higher HDL can actually lower your risk for developing heart problems.

What should your cholesterol be?

- Total cholesterol should be below 200
- LDL should be less than 100
- HDL should be 40 or higher

BE A HEART SAVER

The Wellness Department has developed specific classes to help you reduce the risk for developing heart problems. We can teach you how to manage your blood pressure and cholesterol. For more information, or to sign up for a class please call The Wellness Department @ 314-6014.

Cholesterol Management Class

Learn what cholesterol is, what the types of cholesterol are, types of fat, and how smoking affects your cholesterol. Know your risk factors for heart disease. Discuss ways to lower cholesterol. Learn how changing your eating habits and exercising can "SAVE YOUR HEART."

Hypertension Class

Learn how lifestyle changes can help manage your blood pressure. Discuss how anti-hypertensive medications, sodium restrictions, sound nutrition, exercise and stress management can help you.

Sea-Shore Tour Revision To Affect Some HMs, DTs

By Chief Naval Personnel Public Affairs

WASHINGTON, DC - Revised sea-shore rotation (SSR) tour lengths have been announced, and many Sailors, including hospital corpsmen and dental technicians, will see their sea-shore rotations changed.

The revised SSR tour lengths are designed to better match the projected number of Sailors available with funded billet requirements at sea and ashore. The aim of the revision is to limit significant changes so Sailors and their families have maximum stability in planning their careers.

"The CNO's goal for the career rates (E-5 to E-9) is 36 months of sea duty and 36 months of shore duty," said CDR Thomas McGovern, aviation enlisted community manager. Working toward this goal, the number of career rates (E5-E9) with an SSR above 48 months at sea and 36 months ashore has dropped from 37 to 30.

"We are trying to make that goal for as many rates as possible," said McGovern. "However, we can't always do that. It's based on the rating structure, because of certain Navy requirements that some ratings are at sea more than others and

we have to work with that and balance the sea-shore rotations."

While not all DTs and HMs will be affected, many will find they will get more time on shore. How much more time - or if there will be a change - depends upon their rank or specialty.

Projected rotation dates (PRD) will be adjusted by Navy Personnel Command (NAVPERSCOM) based on length of a Sailor's remaining tour. Sailors with PRDs of October 2002 or earlier will not be adjusted. Additionally, if a Sailor is advanced in grade during their current tour, NAVPERSCOM is authorized to adjust the Sailor's PRD to that of the senior pay grade.

Sea-shore tour lengths are primarily determined by the ratio of sea billets to shore billets for each rate; this ratio is used to determine the length for each assignment. Over time, some rates will become more sea intensive or shore intensive if the billet base is not adjusted. The office of the Chief of Naval Personnel is working to realign general duty shore - and some sea -

billets between shore and sea intensive rates in an effort to further balance SSR to the greatest extent possible.

The eventual goal is to reduce the maximum sea tour for all career rates (E5-E9) to not more than 48 months.

"A larger portion of the force are careerists now versus years and years ago. We have more junior Sailors with spouses at younger ages, and they want to spend more time with their family and we recognize that," said Capt. Stephen Conn, director of enlisted plans and policy.

"I think everybody in the Navy certainly understands that going to sea is central to the naval service and is what the Navy is all about.

"We do strive not to burden Sailors any more than necessary. Sea-shore rotation, generally, is better than it was decades ago," Conn added.

For a complete list of revised sea-shore tour lengths, including DTs and HMs, see NAVADMIN 41/01, available on the Web at www.bupers.navy.mil.

CNO stresses training and professional development with EXCEL

By Senior Chief Journalist Denny Banister, Task Force EXCEL Public Affairs

WASHINGTON (NNS) — "The 'Revolution in Training' is my top action item for the coming year." With these words, Chief of Naval Operations Adm. Vern Clark set the course for the board of advisors of Task Force for Excellence through Commitment to Education and Learning (EXCEL).

"I am convinced the Navy cannot succeed in the future if we do not better equip our leaders to accomplish the task we've given them — which is to provide for the growth and development of our Sailors," Clark told the attendees.

The CNO spoke at a recent meeting of Task Force EXCEL's board of advisors to help ensure total fleet involvement in Task Force Excel, the Navy's revolutionary training initiative.

One of the goals of Task Force EXCEL is to give Sailors comparable training as received by their civilian counterparts, in a comparable time frame, and to provide comparable accreditation, certifications and qualifications.

"We want to put initials at the ends of peoples names, as well as before them," explained Rear Adm. Harry Ulrich, director of Task Force EXCEL.

Using the Sailor Continuum as a road map, Task Force EXCEL is addressing professional and

personal development, leadership, qualifications and certifications, and overall performance.

"We want to develop the whole Sailor. We want to provide all Sailors with the necessary tools and opportunities to learn, grow and lead," said Vice Adm. Alfred Harms, Chief of Naval Education and Training.

A key part of the meeting focused on how pilot projects now beginning are working to align Navy training with civilian certification programs.

These pilot projects include the ratings of mess management specialist (MS), information technology specialist (IT) and master-at-arms (MA).

For example, the MS pilot project currently is working with the American Culinary Institute of America to adopt and adapt their training and education program for the Navy. The goal is to give Sailors the same certifications as their civilian counterparts.

Members of the Task Force EXCEL board of advisors are a "Who's Who" of Navy leadership.

Some of the 16 admirals making up the board include: ViceAdm. Patricia Tracey, director of the Navy Staff; Vice Adm. Dennis McGinn, deputy Chief of Naval Operations for warfare requirements and programs; Vice Adm. Norbert Ryan, Chief of Naval Personnel/deputy Chief of Naval

Operations for manpower and personnel; Vice Adm. John Totushek, Chief of Naval Reserve/ commander of the Naval Reserve Force and director of the Naval Reserve; Vice Adm. Albert Konetzni, deputy commander, Fleet Forces Command and chairman of the board of advisors; and Vice Adm. Alfred Harms, Chief of Naval Education and Training.

Master Chief Petty Officer of the Navy (SS/SW/AW) James Herdt also sits on the board of advisors.

"This is an incredible board of advisors," said Ulrich. "This group is going to ensure that the fleet is with us every step of the way."

When the board of advisors meets again in March, the focus will be on human performance analysis and upcoming pilot projects scheduled to get underway in the spring.

The CNO said Task Force EXCEL is creating a major cultural change within the Navy.

"I want our people to be better educated, part of a Navy where there are no non-rated Sailors. The Navy's future is about a more highly educated force. We are going to do this!"

For more information on Task Force EXCEL, go to <http://www.excel.navy.mil>.



Black History month: a time to reflect

By Lt. Reginald S. Daniels, CHC, USNR

In 1926 Black History Month was established through the efforts of Dr. Carter G. Woodson. It is important to recall that between 1619 and 1926, African Americans and other people of African descent were classified as a race that had not made any contribution to human civilization. Before the Civil War, African Americans were dehumanized and having no civil rights, constitutionally defined as a fraction of a human being. It is estimated that between 1890 and 1925, an African American was lynched on an average of one every two and a half days.

African Americans were so dehumanized and their history, so distorted in Academia, that “slavery, peonage, segregation and lynching” were considered justifiable conditions. This inspired the talented and brilliant African American scholar, Dr. Carter G. Woodson to lead the struggle and search for the truth concerning African American history. By his efforts, he institutionalized what began as “Negro History Week” and developed into Black History Month. A Harvard trained Ph.D., Dr. Woodson was the first to devote his life to the historical study of the African American experience in the United States, Africa, and throughout the world.

Under Woodson’s direction, “Negro History Week” was launched on a serious platform in 1926, to neutralize the apparent ignorance and deliberate distortion of Black History. Meetings, exhibitions, lectures and symposia were organized in order to give a more objective and scholarly balance in American and World history. Today, this observance has been expanded to encompass the entire month of February. This month is also significant because it marks the birthdays of several great African American pioneers and institutions.

These include the birthdays of Frederick Douglass, W. E. B. Dubois, Langston Hughes, Eubie Blake, the NAACP and the first Pan African Congress. The first African American Senator, Hiram Revels, also took the oath of office in February 1870.

African Americans have always been committed to the issue of freedom in the United States. They have always been among the first responders to fight in America’s wars. In 1777, Rhode Island was the first state to form an African American regiment that saw action during the Revolutionary War. These soldiers fought bravely at the battle of Yorktown against General Cornwallis, which led to his surrender. Their actions symbolize the commitment of these soldiers to their country, especially at a time when their individual rights were not fully recognized.

In Romans 1:17, the Apostle Paul stated, “the just will live by faith.” Patriotism in the African American community, has always been faithful to American democracy. Black History Month is celebrated to help make the public aware of the accomplishments of African Americans as an important part of American history. The faithfulness and loyalty of African Americans is shared with all Americans, regardless of their religion, culture, or ethnic origin.

As we reflect upon Black History Month, let us keep in mind that we are Americans first, and that we share a common history in the development of our country.

Although our origins are from different parts of the world in America we strive for justice and faithfulness to the fair treatment and equality of all. May God give us wisdom, knowledge, and strength to fulfill our commitment to these ideals.

Vaccine ban for pregnant servicewomen strengthened

Assistant Secretary of Defense for Health Affairs William Winkenwerder issued policy guidance today that reiterates and strengthens long-standing DoD policy to avoid immunization of servicewomen of childbearing age during pregnancy.

This action was taken because of issues raised about preliminary data from a non-peer reviewed Naval Health Research Center Study of women who received the anthrax vaccine.

“Although these study results are preliminary and there are significant concerns about the database that require further investigation before any conclusions can be made, we are taking these steps to reaffirm our existing policies,” stated Winkenwerder.

The preliminary data, which has not been scientifically peer reviewed and will require further validation, identified a possible relationship between maternal anthrax vaccination in the first trimester and higher odds of birth defects. Because the data supporting the study showed that a number of women might have received the anthrax vaccine beyond the first trimester, study data is now being re-validated. The peer-review publication process usually takes several months. The final report will be available then.

At the Department’s request, the Centers for Disease Control and Prevention will issue a report next week in its Morbidity and Mortality Report that provides further details of the study. Winkenwerder’s memo is on the Web at <http://www.defenselink.mil/news/Jan2002/d20020116inoc.pdf>.

New Senior Enlisted Advisor to assist TMA with beneficiary issues

The TRICARE Management Activity (TMA) recently welcomed its new Senior Enlisted Advisor, Army Sgt. Maj. Harry L. Robinson Jr., to the staff. In this new position, Robinson is providing TMA leadership with valuable internal and external input on the day-to-day operations of TRICARE.

Mr. Thomas F. Carrato, TMA’s executive director, said, “Sergeant Major Robinson brings a new dynamic to the TMA staff. We are fortunate to have someone with his extensive health care and leadership background advising us on grassroots TRICARE issues.”

A career soldier, Robinson has over 25 years of service. Most recently he served as chief wardmaster of the 249th General Hospital at Fort Gordon, Ga. His other leadership positions within the Army Medical Department and U.S. Army include senior clinical non-commissioned officer (NCO), first sergeant, senior medical advisor, section NCO, operations NCO, platoon sergeant and squad leader.

His positions of increasing responsibility have prepared Robinson for his new TMA leadership assignment. In addition to working customer service issues, he serves as “adjunct faculty” for “TRICARE University,” TMA’s online educational resource for TRICARE advisors; assists as liaison to his counterparts at the Surgeons General and Lead Agent offices; plans, devel-

ops and facilitates the senior enlisted panel at the annual TRICARE Conference; partners with internal and external beneficiary organizations; communicates efforts under way at TRICARE to beneficiary and professional groups; and provides TMA leadership with current topics for discussion.

Robinson is personable and knowledgeable about TRICARE — a great combination for a customer service provider. “I hope to tackle and solve all types of beneficiary issues, from large-scale challenges to individual concerns,” he states. When introduced to the TMA Communications and Customer Service Directorate staff, Robinson said, “One of my roles here is to help solve complex health care issues that are brought to my attention through my travels. I look forward to working with you to solve the issues that affect our beneficiaries.”

His combination of experience, attitude and education — he holds a master’s degree in educational leadership from Troy State University and a bachelor’s degree in occupational education specialization in health care administration from Wayland Baptist University — makes Robinson the ideal candidate for communicating the needs of enlisted personnel to TMA leadership.

U.S. Navy ships named in honor of African Americans

As of late 1998, nine Navy ships have been named in honor of African-Americans. This page lists these ships. Internet links are available for most ships and provide additional information and photos.

USS Harmon (DE-678), 1943-1967. The first ship to be named for an African-American, Harmon honored Mess Attendant First Class Leonard Roy Harmon, who posthumously was awarded the Navy Cross for heroism during the Naval Battle of Guadalcanal, 13 November 1942.

USS George Washington Carver (SSBN-656), 1966-1993. Named in honor of the noted scientist George Washington Carver (1864-1943).

USS Jesse L. Brown (DE-1089, later FF-1089 and FFT-1089), 1973-1994. Named in honor of Ensign Jesse L. Brown, USN (1926-1950), the first African-American Naval Aviator, who was killed in action during the Korean War.

USS Miller (DE-1091, later FF-1091), 1973-199_. Named in honor of Cook Third Class Doris ("Dorie") Miller, who was awarded the Navy Cross for heroism during the Pearl Harbor Raid, 7 December 1941.

USNS PFC James Anderson, Jr. (T-AK-3002), 1985-____. Named in honor of Private First Class James Anderson, Jr., USMC (1947-1967), who was posthumously awarded the Medal of Honor for heroism during the Vietnam War.

USS Rodney M. Davis (FFG-60), 1987-____. Named in honor of Sergeant Rodney M. Davis, USMC (1942-1967), who was posthumously awarded the Medal of Honor for heroism during the Vietnam War.

USNS Henson (T-AGS-63), 1998-____. Named in honor of the Arctic Explorer Matthew Alexander Henson (1866-1955).

USNS Watson (T-AKR-310), 1998-____. Named in honor of Private George Watson, U.S. Army (19??-1943), who was posthumously awarded the Medal of Honor for heroism during the Second World War.

USS Oscar Austin (DDG-79). Named in honor of Private First Class Oscar P. Austin, USMC (1948-1969), who was posthumously awarded the Medal of Honor for heroism during the Vietnam War.

AFRICAN-AMERICANS AND THE U.S. NAVY

African-Americans have served in the U.S. Navy since its beginnings. They have worked for the Navy as sailors and civilians providing the Navy with important services from all walks of life. This section presents a broad selection of images depicting African-Americans and their service to the United States Navy.



USS Monitor (1862-62)

Crewmembers cooking on deck, in the James River, Virginia, 9 July 1862. Photographed by James F. Gibson.



Munsan-Ni, Korea

Doctor and Corpsmen irrigate muscle tissue, as a wounded man is prepared for an operation, at the Medical Company, 23 September 1952.



USS New Jersey (BB-16)

Four sailors of the ship's landing party, with cartridge belts and M1903 rifles, March 1915. They are identified as (left-to-right): Bell, Johnson, Thomas and Marshall.



Da Nang Harbor, Republic of Vietnam

Mineman Second Class Franklin Marshall, a Navy Explosive Ordnance Disposal Team member, conducts a search for mines, especially those attached to ship's hulls, circa April 1966.



USS Copahue (ACV-12)

Mess Attendants manning a 20mm machine gun, in a gun tub beside the flight deck, 9 September 1942. The carrier was then en route from Alameda, California, to the southwest Pacific.



USS John Adams (SSBN-620)

Seaman Daniel J. Lewis stands watch as lookout on the submarine's bridge, while it runs on the surface, December 1969.